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7590

04/07/2004

SOFER & HAROUN, L.L.P.
Suite 910
317 Madison Avenue
New York, NY 10017

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Sandria Cirillo

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/025,832	12/19/2001	Robert Arnold	688-266	4239

TITLE OF INVENTION: CLIP-ON CORNER ALIGNMENT DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/07/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
DRUAN, THOMAS J	3724	083-884000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Sofer & Haroun, LLP**

2 _____

3 _____

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Craftek Products, Inc.**Spokane, Washington**Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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- ☒ Issue Fee
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